

LIVING AND GRIEVING TOGETHER

PART 2 OF 6



Easing Fear in Early Grief

Supporting families through the crazy early hours, days and weeks following the death of a loved one.

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Grievors often feel stressed, agitated, anxious, fearful, panicky, worried and uneasy following a death. These are natural responses when loss impacts one's life. As author C.S. Lewis wrote after his 45-year-old wife died of cancer, "No one ever told me that grief felt so like fear."

Feeling these emotions is not pleasant; in fact, I know that it can be terrifying. Still, fear is a perfectly normal emotion for grievors to experience after someone special dies. And for grievors who are experiencing fear, it is often part of what is making them feel "crazy." Understanding the role of fear in early grief can help you be of support to the families you serve.

Why Grievors Feel Afraid

Why is fear so common in the first days and weeks after a death? While fear rarely feels good, there are a number of reasons it makes sense in early grief. First, the death of someone we love assaults our sense of safety, which arouses our body's fight, flight or freeze

systems. Stress chemicals flood our bloodstreams. Our minds and bodies are placed on high alert for the possibility of more danger.

Second, a death often creates numerous practical stressors. Immediate family have a lot to take care of in the first days and weeks – people have to be notified, funerals planned, paperwork completed, financial matters tended to and difficult conversations had. While you are certainly helping families with many of these obligations, they are nonetheless stressful and compound the natural biochemistry of fear.

Third, death naturally causes existential fear. It makes us worry about how or if we'll survive being shattered. We are forced to confront unanswerable questions about the meaning and purpose of life. We realize how vulnerable we are and how vulnerable other loved ones who are still living may be. Life's cruelty and fleetingness are especially pronounced at this time and can feel quite scary.

And fourth, a core relation-

ship has been severed. Our relationships often make us feel safe and secure in who we are as individuals. They also ground us as part of a family and community. The prospect of having to rebuild both our self-identity and sense of security can be overwhelming.

It is no wonder fear and anxiety can be such a big part of the craziness of early grief. You can help grievors by affirming that any fears they might express to you are normal and encouraging them to find ways to soothe those fears.

Recognizing Fear

Grievors aren't always aware that they're feeling afraid or anxious. It can sometimes be hard to recognize fear and anxiety for what they are, especially if they show up in ways people don't necessarily associate with fear. Here are some common fear-based symptoms in early grief:

- Nervous, tense or restless
- Sense of foreboding that something else that's bad will happen

- Faster-than-normal heart rate
- Faster-than-normal breathing
- Trembling or shaking
- Fidgety or jumpy
- Startling easily
- Fatigue and weakness
- Gastrointestinal troubles
- Racing thoughts
- Repetitive thoughts/worries
- Trouble concentrating
- Trouble sleeping
- Avoiding certain places, people, circumstances
- Over-isolating.

Grievers regularly experiencing one or more of these symptoms are probably struggling with fear and anxiety in early grief. It's common and normal. Again, you can help by affirming that these symptoms are normal parts of the stress of early grief.

Soothing Fear and Anxiety

While fear in early grief is normal and understandable, it can also be a paralyzing, all-consuming experience that prevents grievers from getting the help and support they need in the short term. And if it goes on too intensely for too long, it can also harm their health because stress chemicals cause and worsen disease. Studies show that chronic anxiety weakens our immune system, causes cardiovascular damage, leads to gastrointestinal trouble, accelerates aging, worsens memory and decision-making, and may result in risk for clinical depression.

Also important: Unchecked fear tends to get in the way of other mourning work that

will help people integrate and experience their early grief. Basically, fear can throw up a roadblock that stalls and even intensifies early grief, so learning how to soothe fear in healthy ways is an essential daily self-care priority for grieving people.

The following tips and activities may help ease their fear. You can encourage grieving people to give one of them a try any time they feel anxious, restless or afraid.

KEEP LINKING OBJECTS CLOSE

Linking objects are items that belonged to the person who died that grievers might now like to have around them. Such items as clothing, books, knickknacks, jewelry, artwork and other prized possessions can help them feel physically closer to the person they miss so much. They can also help them feel safer and calmer.

If they like to hold, be near, look at, sleep with, caress or smell a special belonging of the person who died, they're not at all crazy. They're simply trying to hold on to a tangible, physical connection to their loved one. The person's body may no longer physically be there, but these special items are, and if they help grievers make it through the naturally scary, anxiety-filled early months of grief, so much the better.

I would also suggest that it's important for grievers not to rush into giving away a loved one's belongings. People sometimes hurry into clearing out all the "stuff" because they think it will help them heal and "move on."

But grief is necessary. Trying to go around it doesn't work and is not a good idea. What's more, the person's belongings can actually help families engage in healthy ways with their grief. Finally, many grieving people have told me how much they regret having quickly gotten rid of the belongings of the person who died only to wish, months later, that they had them back. If you're ever in a position to recommend that families proceed slowly and carefully with what they do and when they do something with belongings, I hope you will do so.

Fear enters because a core relationship has been severed and the prospect of having to rebuild both our self-identity and sense of security can be overwhelming.

PRACTICE SELF-CARE

It is good for grievers to indulge themselves with their favorite comforts. In fact, they should not think of them as indulgences but as survival tactics. It's good for them to take a nap or curl up on the sofa with their softest blanket and watch favorite TV shows. They can eat their favorite comfort foods, take a long shower or bath, meet up with friends at a favorite restaurant or invite a good friend over for takeout. They can ask for hugs, listen to soothing music, watch the sunset, play a game on their phone, cuddle or play with their pet or reread a favorite book.

"What if I don't feel like do-

ing anything?" griever sometimes ask. In fact, this is common. It's normal to feel unable to experience joy for a period of time after a significant loss. There's even a term for it – anhedonia. It's when nothing feels motivating, nothing feels pleasurable or makes grievers content or happy. Other signs include a lack of interest in things they used to enjoy, such as work, sex, food, etc.

If you are supporting someone who feels stuck in this period, it would be appropriate to encourage them to see their primary-care provider or a grief counselor. Temporary anhedonia is normal in early grief, but an ongoing condition is a potential sign of

clinical depression. Please encourage them to get the support they need and deserve.

SEE A PHYSICIAN AND/OR COUNSELOR

For those feeling so unwell or "crazy" that they have trouble sleeping, eating and functioning, again, it's a good idea they check in with their doctor. It would also be a good time to consider seeing a grief counselor for a few sessions.

Please note that I am not suggesting there is anything wrong, simply that I have seen time and again that a little professional reassurance and support for the normal, intense symptoms of early grief can help people better survive and take the steps needed to understand them.

Their physician can reassure that any physical symptoms of grief they may be having – body aches, heart palpitations, headaches and more – aren't due to illness that needs diagnosis/treatment.

If a physical concern mimics the symptoms of their loved one – if they are having chest discomfort and

their loved one died of a heart attack, for example – a doctor can help ease their mind by ruling out the possibility.

Grief counseling is another basic form of self-care. Just a few sessions with a compassionate grief counselor can help assure grievers that they are not going crazy but are actually grieving. They can also help support them through their most intense pain.

ENCOURAGE PHYSICAL MOVEMENT

Fear is a primal physical response in the body. For grievers, moving their bodies is an excellent way to reduce stress chemicals while increasing the biochemicals that boost feelings of contentment, ease and happiness, such as dopamine, serotonin and endorphins.

Light exercise can do wonders for lessening anxiety and enhancing feelings of well-being. Grievers who are not physically active already can start really small. Simply walking for 10 minutes can be a helpful start. If they don't like walking, they can choose an activity they enjoy more, such as biking, yoga, shooting hoops, pickleball or gardening.

MAKE SLEEP A PRIORITY

Good sleep and wellness go hand in hand. Poor sleep, fearful thinking and feeling crazy do, too.

Insomnia is very often a normal part of the early grief experience. But for grievers who are not sleeping and are incapable of functioning due to exhaustion, it's probably time for them to seek help with their sleep from a primary-care provider. Temporary

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use of sleep medication or supplements such as melatonin might be wise.

Grievors can also try relaxation and sleep apps, such as Calm and Loóna.

It's worth continuing the search until they find something that ensures they get adequate and restful sleep. Encourage them to seek help,

too, in eventually reestablishing normal sleep patterns.

AVOID MISUSE OF ALCOHOL AND DRUGS

Many people who are grieving turn to alcohol and/or drugs to help them feel less anxiety and pain after a major loss of a loved one. Nobody wants to experience hurt of this magnitude, and looking to numb the pain and fear is certainly understandable.

The problem with using drugs and alcohol to cope with grief, of course, is that they can

harm our bodies and are also habit-forming. What's more, when they are relied on too often, they distance us from the reality of our loss and grief. I have seen many times in which substance use hindered or complicated healing rather than helped it.

It's a good idea for your funeral home to be aware of alcohol- and drug-use disorder assessment and treatment options in your community. Making an appropriate, timely referral to a person in need can make all the difference. ☰

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